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APPLICANTS

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** CONTINUING DATA *****

n/a *ck*

** FOREIGN APPLICATIONS *****

n/a *ck*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NE	SHEETS DRAWING 4	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature <i>AK</i>	Initials <i>ck</i>	

ADDRESS

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TITLE

Plastic basket shopping cart

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
RECEIVED 385		<input type="checkbox"/> 1.16 Fees (Filing)
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